

Red Total

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL FORM (37 C.F.R. § 1.114)

	APPLICATION SERIAL NO.	EXAMINER	ART UNIT		
10434/60901	10/699,097	Anthony D. FICK	1753		
INVENTOR: HU	JANG et al.				
Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. box 1450, Alexandria, VA 22313-1450 on Date: January 22, 2008 Signature: Alan P. Force (Reg. No. 39,673)			
application Seria	l No. 10/699,097, filed on Oct	n under 37 C.F.R. § 1.114 (RCl ober 30, 2003 entitled METHO OLECULES FROM MICRO	OD FOR		

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE (\$) PER CLAIM	FEE (\$)
BASIC FEE			1	<u> </u>	· · · · · · · · · · · · · · · · · · ·	810.00
TOTAL CLAIMS	42	-	42		50.00	0.00
INDEPENDENT CLAIMS	6	-	6		200.00	0.00
MULTIPLE DEPENDENT CLAIM		·			360.00	
Number TOTAL extra must be zero or larger					810.00	
If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.				S	MALL ENTITY TOTAL	405.00

> 01 FC:2801 02 FC:2253

462.69 DA 525.69 DA

- 3. Applicants respectfully request a **three-month** extension of time in which to respond to the Office Action mailed August 9, 2007 for which a three-month response period, expiring on November 9, 2007, was set. The three-month extended period for response expires on February 9, 2008. Please charge the 37 C.F.R. § 1.136(a) **three-month extension fee of** \$525.00, and any additional fees that may be required, to **Deposit Account No. 11-0600.**
- 4. The Commissioner is hereby authorized to charge payment of the fees, including any additional fees required, associated with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account of **Kenyon & Kenyon LLP**, deposit account number 11–0600.
- 5. A duplicate copy of this transmittal form is enclosed.

Respectfully submitted,

Dated: January 22, 2008

Bv:

Alan P. Force (Reg. No. 39,673)

KENYON & KENYON LLP

One Broadway

New York, New York 10004

(212) 425-7200 (telephone)

(212) 425-5288 (facsimile)

CUSTOMER NO. 26646